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Bib Data Sheet

CONFIRMATION NO. 9732

SERIAL NUMBER 09/863,064	FILING DATE 05/21/2001 RULE	CLASS 370	GROUP ART UNIT 2663	ATTORNEY DOCKET NO. 8285/423
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** CONTINUING DATA ***** THIS APPLICATION IS A CON OF 09/296,233 04/22/1999 PAT 6,285,671				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/26/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY IL	SHEETS DRAWING 22	TOTAL CLAIMS 21
Examiner's Signature _____ Initials _____				INDEPENDENT CLAIMS 6
ADDRESS 757				
TITLE Method and system for providing facsimile service over a digital subscriber line				
FILING FEE RECEIVED 1098	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	